BEST AVAILABLE COPT

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/856760

CLAIMS AS FILED - PART I					1			SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		-	TYPE		OR SMALLENTI		NTITY
TOTAL CLAIMS			:					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	486
TOTAL CHARGEABLE CLAIMS			27minus 20=		. 7			X\$ 9=		OR	X\$18=	126
INDEPENDENT CLAIMS			<i>3</i> minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	į	TOTAL		OR	TOTAL	986
CLAIMS AS AMENDED - PART						(Column 2)		SMALL E	NTITY	OR	OTHER SMALL E	
		(Column 1) CLAIMS		HIGH		(Column 3) I	1 1		ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	*** "NID("NI	T CL AINA	=		X40=		OR	X80=	
<u> </u>	FIRST PRESEN	TATION OF M	OLTIPLE DEP	FINDEIN	1 CLAIM		J	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3		ADDIT. FEE	· · · · · · · · · · · · · · · · · · ·		A0011.1 CC	
	177-47 (F) 177-74 (F)	CLAIMS		HIG	HEST .	Columns	ጎ		ADDI-	l	<u> </u>	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL	'	RATE	TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	_	X40=		OR	X80=	
	FIRST PRESE	NIATION OF M	OLTIPLE DEP	ENDEN	II CLAIM		ل	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)			umn 2)	(Column 3	3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE\	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus			=		X\$ 9=		OR	X\$18=	
	Independent		Minus	•••	NE OLAH	=	_	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDE					/		+135=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										4	L. TOTA	
" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OR ADDIT. FEE											<u> </u>	
	The "Highest Nur	nber Previously F	Paid For" (Total o	r Indepe	ndent) is th	ne highest num	nber f	ound in the ap	opropriate b	ox in c	column 1.	